COMMONWEALTH OF KENTUCKY DEPARTMENT FOR NATURAL RESOURCES DIVISION OF OIL AND GAS 300 SOWER BLVD FRANKFORT, KY 40601 502-573-0147



## **Operations and Reclamation Plan**

Operator Name	County	Well No
Surface Owner	Address and Phone No	o
Complete severance of oil & gas ownership	irom surface ownership? 🔲 Ye	es No; If Yes see bottom of page 2.
Multi-well pad?	dentify Permit Numbers:	
<ul><li>and dikes will be constructed if required to c</li><li>Silt fences shall be installed down slope of d</li><li>Pits shall be constructed in stable area (in no</li></ul>	I and stabilized to prevent erosion. Culvert control water movement and protect again isturbed areas to provide sediment barrier on-fill areas) of well site and lined with implies and equipment, trash, discarded marerly disposed of in accordance with 805 KA shed on all graded areas. As soon as possible to the control of	is will be installed as needed to divert surface water flow inst spills. In containment. It is permeable liner. It is and other refuse not contained shall be removed AR 1:170 Section 5(3)5 It is permanent vegetation
Within thirty days (30) after plugging and abandonmen  1. All production and storage facilities, supplies  2. Any remaining excavations will be filled, and  3. Pit contents shall be disposed of in accordan  4. Permanent vegetative cover shall be establis in the Oil & Gas Well Operator's Manual.	s and equipment, and any oil, salt water ar I any remaining disturbed areas, including ace all applicable state and federal regulati	access roads, will be graded. ions and statutes, filled and graded.
The operator shall provide written notification t	o the Division of Oil & Gas of final re	clamation.
A narrative description of the location of all site, tanks, and other production facilities: (	_	cation of roads, pits, gathering lines, the well
Describe steps to be taken and BMP's utilize areas, including access roads: (Must be type		nentation from the well site and all disturbed

## **Proposed Revegetation Treatment:** Seed or Tree Planted Fertilizer and Soil Amendments (Type and Amount/Acre) Area 1 Additional sheets may be attached for your convenience. Attach: Drawing(s) of the well site boundary including the access road, well-site and proposed area involved, drawn over an enlarged section of the U.S.G.S. 1=24,000' topographic map (enlarged to approximately 1"=400') on an 8'x14" sheet of paper using the applicable symbols from the following legend: LEGEND **D** Stream Gathering Lines Diversion [[[]]] Road ........... --x--x--x Spring -Existing Fence Planned Fence Drain pipe with size in inches --12)- $\leftarrow\leftarrow\leftarrow$ --..--..--. Open Ditch Waterway Rock office Cross Drain North Arrow Artificial Filter Strip Buildings Pit: Cut Walls Water Wells Pit: Compacted Fill Walls Tanks Silt Fence Drill Site Storage Facilities The undersigned hereby swears or affirms that the foregoing information and attachments in this Operations and Reclamation Plan from the well site and all disturbed areas, including roads, are true to the best of my knowledge and belief. If any entity other than a sole proprietorship, signatory must be an officer of the entity or provide power of attorney to execute documents. If a sole proprietorship, signatory must be same or provide power of attorney to execute documents. Signature of Operator \_ Title \_\_ Date Printed Name \_\_\_\_\_ Day of \_\_\_\_ Sworn To and Subscribed Before Me This \_\_\_\_ My Commission Expires Notary Public (Surface Owner Signature Below, Shall Be Notarized) **Surface Owner Notice and Agreement** If you do not agree with the proposed use of your land by the well operator, the well operator may request mediation of your dispute by the Office of Administrative Hearings, Energy and Environment Cabinet. If mediation is requested, and you decide to participate, each party to the mediation will be charged one hundred dollars (\$100) made payable to Kentucky State Treasurer. You will be notified of the time and place for mediation, if the well operator chooses mediation, and of your right to participate. I have reviewed the application and the information submitted with this form, and agree to the terms of this proposed plan as set forth herein. I understand that the execution of this document in no way affects compensation for surface damages as described in KRS 353.595 or other contractual agreement. Date \_\_\_ Signature of Severed Mineral Surface Owner \_\_\_\_ Printed Name of Severed Mineral Surface Owner Sworn To and Subscribed Before Me This \_\_\_\_\_\_ Day of \_\_\_\_\_

Notary Public

My Commission Expires

## Continuation for additional proposed revegetation treatments

Operator Name	County	Well No
Surface Owner	Address and Phone No.	
Fertilizer and Soil Amendments		Seed or Tree Planted (Type and Amount/Acre)
Area 3	-	
	-	
	-	
Area 4	-	
	-	
	-	
Area 5	-	
	_	
Area 6		
	-	
	-	
Area 7	_	
	-	
	-	
Area 8	-	